

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. 10/6000X	FILING DATE	
						CLAIMS		
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	/		/				51	
2							52	
3		6		1			53	
4		2		1			54	
5	/		/				55	
6							56	
7							57	
8							58	
9							59	
10							60	
11							61	
12							62	
13							63	
14							64	
15							65	
16							66	
17							67	
18							68	
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37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	2		1				TOTAL IND.	
TOTAL DEP.	4		2				TOTAL DEP.	
TOTAL CLAIMS	6		160				TOTAL CLAIMS	